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Date: October 1, 2007

Facsimile Number: 571-273-8300

OCT 0 1 2007

To:

Examiner E.S. McCall

Group Art Unit 2855, USPTO

From:

Mr. John R. Mattingly

MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re:

USSN 10/562,824

Attorney Docket No.: KAS-5122

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

Transmittal;

Amendment;

3 sheets Replacement Drawings;

3 sheets Annotated Drawings;

Petition for Extension of Time for three months; and Credit Card Payment Form in amount of \$1,020.00 in payment of three month EOT fee.

Reg. No. 30,293

October 1, 2007

Date

Total Number of Pages (including cover sheet): _

Form PTO-1083

Patent

in RE application of

T. MORINO et al

Group Art Unit: 2855

Examiner: E.S. McCall

Case Docket No. KAS-5122

RECEIVED

OCT 0 1 2007

Serial No.: 10/562,824

HEATING RESISTOR TYPE FLUID FLOW RATE

MEASURING APPARATUS FOR INTERNAL COMBUSTION ENGINE HAVING THE MEASURING APPARATUS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

For:

Transmitted herewith is an Amendment in the above-identified application.

Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra
Total	5	Minus	** 20	=
Indep.	3	Minus	*** 3	=
First	resentation of	Multiple De	pendent Claims	

SMALL ENTITY				
Rate	Additional Fee	OR		
X 25	\$			
X 100	\$			
X 180	\$			
Total	\$	OR		

SMALL ENTITY				
Rate	Additional Fee			
X 50	\$			
X 200	\$			
X 360	\$			
Total	\$			

THED THAN A

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space, if the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Please charge my Deposit Account No. 50-1417 in the amount of §

Ø A Credit Card Payment Form in the amount of \$ 1,020.00 is attached for 3 month extension of time

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

冈 Any patent application processing fees under 37 CFR 1.17.

 \boxtimes Any Extension of Time fees that are necessary, which are hereby requested if necessary.

В٧

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Tel: (703) 684-1120 Fax: (703) 684-1157

October 1, 2007 Date:

John R. Mattingly, Feg. I Attorney for Applicant(s) eg. No. 20,293